



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 114627		2. Exact name of the Corporation BARRINGTON HARDWARE, INC.			
3. Principal office address 65 BAY SPRING AVENUE		City BARRINGTON		State RI	Zip 02806
4. Business Phone No. 401-246-0550		5. State of Incorporation RHODE ISLAND			
6. Brief description of the character of business conducted in Rhode Island TO ENGAGE IN BUSINESS OF SELLING HARDWARE SUPPLIES					
PRESIDENT					
President Name SUSAN J. SHEA			Vice-President Name SAME		
Street Address 65 BAY SPRING AVENUE			Street Address		
City BARRINGTON	State RI	Zip 02806	City	State	Zip
Secretary Name SAME			Treasurer Name SAME		
Street Address			Street Address		
City	State	Zip	City	State	Zip
DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)					
Director Name SUSAN SHEA			Director Name SAME		
Street Address 65 BAY SPRING AVENUE			Street Address		
City BARRINGTON	State RI	Zip 02806	City	State	Zip
Director Name SAME			Director Name SAME		
Street Address			Street Address		
City	State	Zip	City	State	Zip
SHARES ISSUED ("X" BOX FOR ATTACHMENT)					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of Instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			8000	COMMON	\$01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.


Signature of Authorized Representative

Date

SUSAN SHEA

Print or Type Name of Authorized Representative

FILED

JAN 31 2013

2852